

FISCAL NOTE

HB 2005 - SB 2208

March 19, 2005

SUMMARY OF BILL: Requires the testing of oxygen saturation levels at least one time before a newborn child is discharged from a hospital. Requires additional testing if oxygen saturation level is below 92 percent when initially evaluated to determine the cause of the low oxygen saturation level.

ESTIMATED FISCAL IMPACT:

Increase State Expenditures – \$528,500

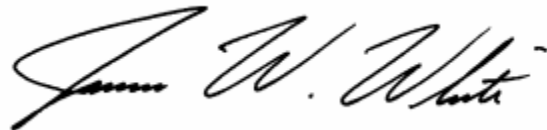
Other Fiscal Impact – Increase Federal Expenditures - \$947,500

Assumptions:

- Asymptomatic testing of newborns for oxygen saturation level is not current practice.
- TennCare would reimburse for oxygen saturation level testing of approximately 36,000 births each year.
- The average reimbursement for each test is \$41 resulting in an increase in expenditures for reimbursements of \$1,476,000, which includes both state and federal expenditures.

CERTIFICATION:

This is to duly certify that the information contained herein is true and correct to the best of my knowledge.

A handwritten signature in black ink, appearing to read "James W. White".

James W. White, Executive Director